



2176

In re Application of:

Docket No.: 00862.021801.

KOJI NAKAGIRI ET AL.

Appln. No.: 09/489,937

Examiner William L. Bashore

Filed: January 24, 2000

Group Art Unit: 2176

For: INFORMATION PROCESSING SYSTEM AND
METHOD OF CONTROLLING SAME,
INFORMATION PROCESSING APPARATUS
AND METHOD OF CONTROLLING SAME, AND
COMPUTER READABLE MEMORY

Date: December 29, 2003

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

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Technology Center 2100

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 37	MINUS	** 37	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	* 9	MINUS	*** 9	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$____ is enclosed.

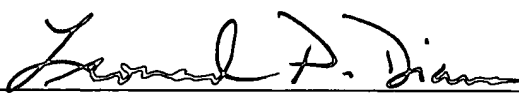
☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$____ to cover the Extension fee for response with a ____-month extension is enclosed.

☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below.



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00862.021801.

PATENT APPLICATION

SC
AGA
1-14 04

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
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Technology Center 2100

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action mailed September 29, 2003, please amend the above-identified application as follows. The specification changes are shown at page 2, amendments to the claims are reflected in the listing beginning at page 3, and the Remarks begin at page 14.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

December 29, 2003.

(Date of Deposit)

Leonard P. Diana (Reg. No. 29,296)

(Name of Attorney for Applicant)

Leonard P. Diana

Signature

December 29, 2003

Date of Signature